



DATE: March 24, 2011

TO: BPA SUD TREATMENT AND RSS PROVIDER NETWORKS

RE: CHANGES TO CASE MANAGEMENT AUTHORIZATIONS AND CLAIM SUBMISSION

Hello Providers,

Changes to IDAPA 16.07.20 Rules in 2010 have resulted in the need to update how Case Management services are authorized and billed through BPA. IDAPA 16.07.20 can be found here: [IDAPA Rules](#).

Clinical Case Management is now considered to be a Treatment Service rather than a Recovery Support Service. To assist you in making the necessary changes we have attached the updated SUD Rate Matrix to this communication. In addition, you will find required changes to the authorization and billing requirements for case management services below.

Effective Immediately:

Basic/Intensive Case Management no longer requires a modifier to be used when submitting claims. Providers have billed using the code/modifier combinations of H0006.B (for basic) and H0006.I (for intensive).

Providers should now bill H0006 without a modifier. BPA will continue to process claims that we have already received that were submitted with a modifier.

Clinical Case Management has been changed from a Recovery Support Service to a Treatment Service.

Providers who are approved for Clinical Case Management and have been billing for it will be receiving client authorizations specifically for Clinical Case Management. We will work with those providers individually to identify clients who are receiving Clinical Case Management services.

Clinical Case Management no longer requires a modifier to be used when submitting claims. Providers have billed using the code/modifier combination of H0006.C.

Providers should now bill H0006 under their new Clinical Case Management authorizations.

Thank you in advance for your immediate attention to this communication. Should you have further questions, please contact BPA Provider Network Management at 800-688-4013.

Thank you,
BPA Provider Network Management